

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u>MR</u> FIRST <u>OSCAR</u> MI	OFFICE USE ONLY Date Received Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged	
	NICKNAME LAST <u>LEESER</u> SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <u>1017 QUINTA ANTIGUA</u> <u>EL PASO, TEXAS 79912</u>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(915) 373-1234</u>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST <u>CHRISTINA</u> MI		
	NICKNAME LAST <u>ACOSTA</u> SUFFIX		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <u>9327 ELGIN EL PASO, TEXAS 79907</u>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <u>(915) 433-1647</u>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year <u>4 / 2 / 2013</u> THROUGH <u>5 / 1 / 2013</u>		
11 ELECTION	ELECTION DATE Month Day Year <u>5 / 11 / 2013</u>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <u>MAYOR</u>	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT

FORM C/OH

## SUPPORT & TOTALS

 CITY CLERK DEPT.  
 2013 MAY -2 PM 5:51 COVER SHEET PG 2

14 C/OH NAME

OSCAR LEESER

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)
 THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE  
 CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR  
 CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION  
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$93,664.85

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

0

4. TOTAL POLITICAL EXPENDITURES

\$83,896.70

CONTRIBUTION  
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

\$

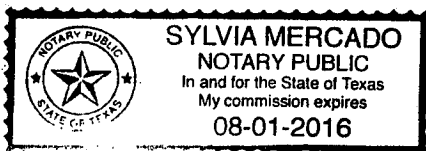
6,969.30

OUTSTANDING  
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

5,120.80

18 AFFIDAVIT


 I swear, or affirm, under penalty of perjury, that the accompanying report  
 is true and correct and includes all information required to be reported by  
 me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

 Sworn to and subscribed before me, by the said Oscar Leaser, this the  
2nd day of May, 20 13, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
CITY CLERK DEPT **SCHEDULE A**

2013 MAY -2 PM 5:51

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 26	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2/27/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: THOMAS P. YEGGE	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 11112 TERRELL AVE. EL PASO, TX 79936		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/27/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: W. BARTON BOLING	Amount of contribution (\$) \$1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6154 LOS FELINOS CIR. EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/25/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: RUSSELL F. ROBINSON	Amount of contribution (\$) \$250	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 42 E. 69th ST. NEW YORK, NY 10021		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: CARLOS A. SAMANIEGO	Amount of contribution (\$) \$200	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 329 BELVIDERE EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/29/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JOHN F. Mcalmon	Amount of contribution (\$) \$1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2209 FOREST BEND AUSTIN, TX 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

 CITY CLERK DEPT. **SCHEDULE A**  
 2013 MAY -2 PM 5:51

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>3/30/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>BILL LESLIE</b>	7 Amount of contribution (\$) <b>\$250</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>201 NORTHWIND DR. EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>3/28/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>CHARLES P. CAVARETTA</b>	Amount of contribution (\$) <b>\$300</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>729 TWIN HILLS DR. EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/30/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>SHARON A. ROBINET</b>	Amount of contribution (\$) <b>\$100.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1075 ESPLANDA CIR. EL PASO, TX 79932</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/30/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>SAMUEL C. STREEP</b>	Amount of contribution (\$) <b>\$100</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1624 DEDE EL PASO, TX 79902</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/2/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JAMES E. ROGERS JR.</b>	Amount of contribution (\$) <b>\$500</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>5035 MEADOWLARK EL PASO, TX 79922</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

 CITY CLERK DEPT.  
 2013 MAY -2 PM 5:51  
**SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/2/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GARY W. SOTIR 6 Contributor address; City; State; Zip Code 1532 VIA APPIA ST. EL PASO, TX 79912	7 Amount of contribution (\$) \$1,000 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/3/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JAMIE HARRIS Contributor address; City; State; Zip Code 6104 PINEHURST DR. EL PASO, TX 79912	Amount of contribution (\$) \$1,000 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DOUGLAS A. SCHWARTZ Contributor address; City; State; Zip Code P.O. BOX 13611 EL PASO, TX 79913	Amount of contribution (\$) \$5,000 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SHERMAN H. BARNETT Contributor address; City; State; Zip Code 8913 DIRK COURT EL PASO, TX 79925	Amount of contribution (\$) \$5,000 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: TANIA SCHWARTZ Contributor address; City; State; Zip Code 619 CAMINO REAL AVE. EL PASO, TX 79922	Amount of contribution (\$) \$5,000 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/11/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JIM CARDWELL 6 Contributor address; City; State; Zip Code 5772 DIAMOND POINT CIR. EL PASO, TX 79912	7 Amount of contribution (\$) \$2,500 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/11/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GY PADILLA Contributor address; City; State; Zip Code 1300 MURCHISON DR. STE 100 EL PASO, TX 79902	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/13/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SANDY HUGHES Contributor address; City; State; Zip Code 4785 TURTLE DOVE EL PASO, TX 79922	Amount of contribution (\$) \$300 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/15/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: RICARDO B. MEDINA Contributor address; City; State; Zip Code 299 VAQUERO LN. EL PASO, TX 79902	Amount of contribution (\$) \$100 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/15/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LISA J. SOTO Contributor address; City; State; Zip Code P.O. BOX 12307 EL PASO, TX 79913	Amount of contribution (\$) \$2,500 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**CITY CLERK DEPT. SCHEDULE A**

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2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4/15/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JIM &amp; NITA PHILLIPS</b> 6 Contributor address; City; State; Zip Code <b>900 THUNDERBIRD DR. EL PASO, TX 79912</b>	7 Amount of contribution (\$) <b>\$1,000</b> <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/15/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>R. A. SMITH</b> Contributor address; City; State; Zip Code <b>P.O. BOX 370167 EL PASO, TEXAS 79937</b>	Amount of contribution (\$) <b>\$1,000</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/15/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>WM J. MOUNCE</b> Contributor address; City; State; Zip Code <b>600 SUNLAND PARK DR. STE 6-300 EL PASO, TX 79912</b>	Amount of contribution (\$) <b>\$2,500</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/16/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>EDUARDO SOTO</b> Contributor address; City; State; Zip Code <b>515 S. KANSAS ST. EL PASO, TX 79901</b>	Amount of contribution (\$) <b>\$2,500</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/16/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>STUART D. SLIVA</b> Contributor address; City; State; Zip Code <b>1204 CALLE DEL SUR EL PASO, TX 79912</b>	Amount of contribution (\$) <b>\$100</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

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2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4/16/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>WADE Y. DAW</b> 6 Contributor address; City; State; Zip Code <b>4755 PINE CREEK LN. EL PASO, TX 79922</b>	7 Amount of contribution (\$) <b>\$50.00</b> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/16/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JAMES A. DICK IV</b> Contributor address; City; State; Zip Code <b>5800 MONTANA AVE. EL PASO, TX 79925</b>	Amount of contribution (\$) <b>\$5,000</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/16/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MARSHA E. DAW</b> Contributor address; City; State; Zip Code <b>4755 PINE CREEK LN. EL PASO, TX 79922</b>	Amount of contribution (\$) <b>\$50.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/16/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MARY Y. DAW</b> Contributor address; City; State; Zip Code <b>6736 DESERT CANYON DR. EL PASO, TX 79912</b>	Amount of contribution (\$) <b>\$500.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/17/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>DEAN E. SMITH</b> Contributor address; City; State; Zip Code <b>5900 QUINTA REAL CT. EL PASO, TX 79912</b>	Amount of contribution (\$) <b>\$1,000</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
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**SCHEDULE A**

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2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/17/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BARBARA BERLINER 6 Contributor address; City; State; Zip Code 213 NORTHWIND DR. EL PASO, TX 79912	7 Amount of contribution (\$) \$200. <sup>00</sup>	8 In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: THOMAS ALOST Contributor address; City; State; Zip Code 1000 QUINTA ANTIGUA LN. EL PASO, TX 79912	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LANCE R. LEVINE Contributor address; City; State; Zip Code 9570 PAN AMERICAN DR. EL PASO, TX 79927	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SANDY A. MESSER Contributor address; City; State; Zip Code 6504 EAGLE RIDGE EL PASO, TX 79912	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JOSEPH R. HANSON Contributor address; City; State; Zip Code 1701 TOMMY AARON DR. EL PASO, TX 79936	Amount of contribution (\$) \$1,000	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**SCHEDULE A**

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2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/17/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: TOMAS CARDENAS 6 Contributor address; City; State; Zip Code 5901 POMONA CT. EL PASO, TX 79912	7 Amount of contribution (\$) \$500 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: OSCAR VEGA JR. Contributor address; City; State; Zip Code 905 VIA PENASCO LN. EL PASO, TX 79912	Amount of contribution (\$) \$500 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: FRANK FEUILLE Contributor address; City; State; Zip Code 857 RIVER OAKS DR. EL PASO, TX 79912	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MARIA/SERGIO ALVAREZ Contributor address; City; State; Zip Code 1004 QUINTA ANTIGUA LN. EL PASO, TX 79912	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: VICTOR APODACA III Contributor address; City; State; Zip Code 211 S. KANSAS ST. EL PASO, TX 79901	Amount of contribution (\$) \$250 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT SCHEDULE A

2013 MAY -2 PM 5:51

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/17/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GREG DIDONNA 6 Contributor address; City; State; Zip Code 5908 VIA NORTE LN. EL PASO, TX 79912	7 Amount of contribution (\$) \$100. <sup>00</sup>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LUIS H. URREA II Contributor address; City; State; Zip Code 5009 VISTA DEL MONTE ST. EL PASO, TX 79922	Amount of contribution (\$) \$200. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LINDA K. BURNS Contributor address; City; State; Zip Code 3029 STONE EDGE RD. EL PASO, TX 79904	Amount of contribution (\$) \$250. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: DALTON L. CALDWELL JR. Contributor address; City; State; Zip Code 1201 CERRITO PERDIDO LN. EL PASO, TX 79912	Amount of contribution (\$) \$200. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SALLY A. DEITCH Contributor address; City; State; Zip Code 712 WALTHAM CT. EL PASO, TX 79922	Amount of contribution (\$) \$250. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

SCHEDULE A

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/17/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JOSEPH OSTROWIDZKI 6 Contributor address; City; State; Zip Code 5925 OJO DE AGUA DR. EL PASO, TX 79912	7 Amount of contribution (\$) \$250. <sup>00</sup>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
10 Employer (See Instructions)			
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HERBERT H. ORTEGA Contributor address; City; State; Zip Code 6215 LOS ALTOS DR. EL PASO, TX 79912	Amount of contribution (\$) \$100. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MONICA C. VARGAS Contributor address; City; State; Zip Code 4017 FLAMINGO DR. EL PASO, TX 79902	Amount of contribution (\$) \$100. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HECTOR M. MALDONADO Contributor address; City; State; Zip Code 3260 N. MESA ST. EL PASO, TX 79902	Amount of contribution (\$) \$100. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: BLANCA M. RAUDALES Contributor address; City; State; Zip Code 5355 MONTAYA DR. EL PASO, TX 79932	Amount of contribution (\$) \$300. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**
CITY CLERK DEPT. **SCHEDULE A**

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2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4/17/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>BORIS KAIM</b> 6 Contributor address; City; State; Zip Code <b>2311 N. MESA EL PASO, TX 79902</b>	7 Amount of contribution (\$) <b>\$250.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/17/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JACOB S. HEYDEMANN</b> Contributor address; City; State; Zip Code <b>1300 MURCHISON DR. STE. 310 EL PASO, TX 79902</b>	Amount of contribution (\$) <b>\$150.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/17/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>FAVE T. ASSI</b> Contributor address; City; State; Zip Code <b>1611 N. KANSAS EL PASO, TX 79902</b>	Amount of contribution (\$) <b>\$25.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/17/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LYNDON E. MANSFIELD</b> Contributor address; City; State; Zip Code <b>869 FOREST WILLOW EL PASO, TX 79922</b>	Amount of contribution (\$) <b>\$360.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/17/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JAIME LOWENBERG</b> Contributor address; City; State; Zip Code <b>6178 LOS ROBLES DR. 79912 EL PASO, TX</b>	Amount of contribution (\$) <b>\$100.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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 CITY CLERK DEPT. **SCHEDULE A**  
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2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4/17/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ANDRES ENRIQUEZ</b>	7 Amount of contribution (\$) <b>\$100.<sup>00</sup></b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>553 CANYON SPRINGS EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/17/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MARINO A. RIOS</b>	Amount of contribution (\$) <b>\$100.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1714 N. MESA ST. EL PASO, TEXAS 79902</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/17/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>WALTER L. TIPPIN</b>	Amount of contribution (\$) <b>\$250.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>3021 TRAWOOD EL PASO, TX 79936</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/17/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ROBERT A. SKIPWORTH</b>	Amount of contribution (\$) <b>\$200.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>310 N. MESA STE. 600 EL PASO, TX 79901</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/17/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JAMES E. SPIER</b>	Amount of contribution (\$) <b>\$200.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1307 RIM RD. EL PASO, TX 79902</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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**POLITICAL CONTRIBUTIONS  
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CITY CLERK DEPT.

**SCHEDULE A**

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2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/18/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JORGE E. PEREZ 6 Contributor address; City; State; Zip Code 7950 SAN PAULO EL PASO, TX 79915	7 Amount of contribution (\$) \$ 100. <sup>00</sup>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
10 Employer (See Instructions)			
Date 4/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: CLEMENT MARCUS Contributor address; City; State; Zip Code 824 DULCINEA ST. EL PASO, TX 79922	Amount of contribution (\$) \$ 500. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MEYER MARCUS Contributor address; City; State; Zip Code 6500 MONTANA AVE. EL PASO, TX 79925	Amount of contribution (\$) \$ 500. <sup>00</sup>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: EPMPOA PAC Contributor address; City; State; Zip Code 747 E. SAN ANTONIO, STE. 103 EL PASO, TX 79901	Amount of contribution (\$) \$ 5,000.	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			
Date 4/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PAULETTE WINGO Contributor address; City; State; Zip Code 1021 LOS JARDINES CIR. EL PASO, TX 79912	Amount of contribution (\$) \$ 1,000	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T)	
Employer (See Instructions)			

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**POLITICAL CONTRIBUTIONS  
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**SCHEDULE A**

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2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/19/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: EPSOA PAC 6 Contributor address; City; State; Zip Code 747 E, SAN ANTONIO NO. 103 EL PASO, TX 79901	7 Amount of contribution (\$) \$2,000 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SANTIAGO IBARRECHE Contributor address; City; State; Zip Code 654 AGUA CALIENTE DR. EL PASO, TX 79912	Amount of contribution (\$) \$50. <sup>00</sup> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: MICHELE BRADEN Contributor address; City; State; Zip Code 6200 PINEHURST DR. EL PASO, TX 79912	Amount of contribution (\$) \$250. <sup>00</sup> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SANDY HUGHES Contributor address; City; State; Zip Code 4785 TURTLE DOVE EL PASO, TX 79922	Amount of contribution (\$) \$200. <sup>00</sup> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/21/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: IRVING J. BROWN Contributor address; City; State; Zip Code 200 BARTLETT DR. STE. 105 EL PASO, TX 79912	Amount of contribution (\$) \$500. <sup>00</sup> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

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**SCHEDULE A**

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2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/22/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LUCINDA B. APODACA	7 Amount of contribution (\$) \$1,000	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6024 TORREY PINES DR. EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ANN B. ANCHONDO	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6416 LOS ROBLES DR. EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: CLYDE E. SCOTT	Amount of contribution (\$) \$1,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 109 CALLE CUESTA EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: TIM WIELAND	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6146 LOS ROBLES DR. EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JAMES A. MARTINEZ	Amount of contribution (\$) \$500	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7170 WESTWIND DR. SUITE 201 EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
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**SCHEDULE A**

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2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4/23/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ELISEO H. BAEZA</b>	7 Amount of contribution (\$) <b>\$ 500.<sup>00</sup></b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>11672 ANDRIENNE EL PASO, TX 79936</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/23/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>SID STEADMAN</b>	Amount of contribution (\$) <b>\$ 500.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>447 EXECUTIVE CTR. EL PASO, TX 79902</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/24/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>BRYAN H. HALL</b>	Amount of contribution (\$) <b>\$ 250.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>725 RIO VALLE CT. EL PASO, TX 79932</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/24/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RICHARD W. KEMP</b>	Amount of contribution (\$) <b>\$ 500.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>898 GALESTRO PL. EL PASO, TX 79928</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/25/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RANDAL S. OLEARY</b>	Amount of contribution (\$) <b>\$ 5,000</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>7910 GATEWAY EAST STE 102 EL PASO, TX 79915</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS****OTHER THAN PLEDGES OR LOANS**

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2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4/25/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>KELLY L. O'LEARY</b> 6 Contributor address; City; State; Zip Code <b>3329 TIERRA ALMA EL PASO, TX 79938</b>	7 Amount of contribution (\$) <b>\$500.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/25/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>GONZALO A. DIAZ</b> Contributor address; City; State; Zip Code <b>1016 QUINTA ANTIGUA EL PASO, TX 79912</b>	Amount of contribution (\$) <b>\$2,500</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/25/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>STEPHEN L. YEGGE</b> Contributor address; City; State; Zip Code <b>6357 CASPER RIDGE EL PASO, TX 79912</b>	Amount of contribution (\$) <b>\$500.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/25/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>DAVID B. KARAM</b> Contributor address; City; State; Zip Code <b>4025 ROADSIDE CT. EL PASO, TX 79922</b>	Amount of contribution (\$) <b>\$250.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/25/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LORETTA BLANKENSHIP</b> Contributor address; City; State; Zip Code <b>9398 VISCOUNT BLVD. STE 4A EL PASO, TX 79925</b>	Amount of contribution (\$) <b>\$250.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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## **SCHEDULE A**

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2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4/26/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JUAN C. DURON</b> 6 Contributor address; City; State; Zip Code <b>3516 ORIO PALMER EL PASO, TX 79938</b>	7 Amount of contribution (\$) <b>\$1,500</b>	8 In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T)			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/27/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>SANDY HUGHES</b> Contributor address; City; State; Zip Code <b>4785 TURTLE DOVE EL PASO, TX 79922</b>	Amount of contribution (\$) <b>\$300.<sup>00</sup></b>	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/27/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>STUART ROBERTS</b> Contributor address; City; State; Zip Code <b>5669 COSTA BLANCA EL PASO, TX 79932</b>	Amount of contribution (\$) <b>\$200.<sup>00</sup></b>	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/27/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JEAN R. JOSEPH VANDERPOOL</b> Contributor address; City; State; Zip Code <b>425 MAJESTIC MOUNTAIN DR. EL PASO, TX 79912</b>	Amount of contribution (\$) <b>\$200.<sup>00</sup></b>	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/27/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>KIMMINS KOATINGS</b> Contributor address; City; State; Zip Code <b>205 COUNTRY CLUB RD. EL PASO, TX 79932</b>	Amount of contribution (\$) <b>\$250.<sup>00</sup></b>	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4/27/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RHOBERTA LEESER</b>	7 Amount of contribution (\$) <b>\$100.<sup>00</sup></b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>7465 PLAZA TAURINA EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>3/18/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MARTINA VALVERDE</b>	Amount of contribution (\$) <b>\$5.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>9300 VISCOUNT #171 EL PASO, TX 79925</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/28/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>PAM WAXMAN</b>	Amount of contribution (\$) <b>\$100.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>7120 ALTO REY AVE EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/29/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>BART BOLING JR</b>	Amount of contribution (\$) <b>\$1,000</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>6006 BALCONES # 9 EL PASO, TX 79912</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>3/30/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JONATHAN HARRIS</b>	Amount of contribution (\$) <b>\$50.<sup>00</sup></b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>2412 ROYAL BIRKDALE DR. PLANO, TX 75025</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

2013 MAY -2 PM 5:51

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/1/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PATRICIA PERRY	7 Amount of contribution (\$) \$500. <sup>00</sup>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 141 CAMINO BARRANCA EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/1/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PATRICIA PERRY	Amount of contribution (\$) \$500. <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 141 CAMINO BARRANCA EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/1/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: RICK TEPLITZ	Amount of contribution (\$) \$100. <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 5916 VIA CUESTA EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/4/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ROBERT FOSTER	Amount of contribution (\$) \$5,000	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6080 SURET STE. 300 EL PASO, TX 79905		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/8/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PHILIP GABBARD	Amount of contribution (\$) \$250. <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 727 C ESPADA EL PASO, TX 79912		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT. **SCHEDULE A**

2013 MAY -2 PM 5:51

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/8/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JOANNE AUSTIN 6 Contributor address; City; State; Zip Code 590 EL GUSTO DR. EL PASO, TX 79912	7 Amount of contribution (\$) \$100. <sup>00</sup> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/9/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SHANNON CRENSHAW Contributor address; City; State; Zip Code 721 ESPADA A EL PASO, TX 79912	Amount of contribution (\$) \$50. <sup>00</sup> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/11/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ED HORTON Contributor address; City; State; Zip Code 25 BERNAY LAGUNA NIGUEL, CA 92677	Amount of contribution (\$) \$250. <sup>00</sup> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: TONY FURMAN Contributor address; City; State; Zip Code 1121 THUNDERBIRD DR. EL PASO, TX 79912	Amount of contribution (\$) \$1,001. <sup>00</sup> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/12/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: GEORGE MCALMON III Contributor address; City; State; Zip Code 3507 FAWN CREEK PATH AUSTIN, TX 78746	Amount of contribution (\$) \$100. <sup>00</sup> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

2013 MAY -2 PM 5:51

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/15/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: TOM HETRICK 6 Contributor address; City; State; Zip Code 1415 CAMBRIDGE KING SOUTHLAKE, TX 76092	7 Amount of contribution (\$) \$200. <sup>00</sup>	8 In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/17/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ROBERT G. BECKOFF Contributor address; City; State; Zip Code 1117 THUNDERBIRD DR. EL PASO, TX 79912	Amount of contribution (\$) \$500. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ALLYSON LEWIS Contributor address; City; State; Zip Code 7338 REMCON EL PASO, TX 79912	Amount of contribution (\$) \$200. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: PARUS DUDLEY Contributor address; City; State; Zip Code 9290 CINCHONA TRL GARDEN RIDGE, TX 78266	Amount of contribution (\$) \$100. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/18/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: TODD HEINS Contributor address; City; State; Zip Code 3125 COYOTE PASS DR. EL PASO, TX 79938	Amount of contribution (\$) \$50. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			



# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.  
2013 MAY -2 PM 5:51

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/19/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: HILDA FINN 6 Contributor address; City; State; Zip Code 6560 GRAND Rdg. EL PASO, TX 79912	7 Amount of contribution (\$) \$1,000	8 In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SCOTT COHEN Contributor address; City; State; Zip Code 5556 BACON RD. OAKLAND, CA 94619	Amount of contribution (\$) \$100. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/20/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ERIC EVANS Contributor address; City; State; Zip Code 750 VIA MIRADA LN. EL PASO, TX 79922	Amount of contribution (\$) \$250. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/22/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JAMES KOSCHMANN Contributor address; City; State; Zip Code 6441 CALLE PLACIDO DR. EL PASO, TX 79912	Amount of contribution (\$) \$500. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/23/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: SHELDON WHEELER Contributor address; City; State; Zip Code 6201 ESCONDIDO DR. EL PASO, TX 79912	Amount of contribution (\$) \$250. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

2013 MAY -2 PM 5:51

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4/23/2013	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: WILLIAM HOLMES 6 Contributor address; City; State; Zip Code 1028 CALLE MILAGRO DR. EL PASO, TX 79912	7 Amount of contribution (\$) \$1,000	8 In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 4/24/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: OSCAR DOMINGUEZ Contributor address; City; State; Zip Code 11125 LA QUINTA SUITE A EL PASO, TX 79936	Amount of contribution (\$) \$250. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/25/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: ROBERT SKOV Contributor address; City; State; Zip Code BOX 310 CLINT, TX 79836	Amount of contribution (\$) \$250. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/25/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JOHN VERLANDER Contributor address; City; State; Zip Code 5835 ONIX SUITE 300 EL PASO, TX 79912	Amount of contribution (\$) \$1,000. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4/26/2013	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: JEFFREY BELLES Contributor address; City; State; Zip Code 11601 TREY BURTON EL PASO, TX 79936	Amount of contribution (\$) \$500. <sup>00</sup>	In-kind contribution description (if applicable)  (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

2013 MAY -2 PM 5:51

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4/26/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RICHARD LYON</b> 6 Contributor address; City; State; Zip Code <b>7598 N. MESA SUITE A EL PASO, TX 79912</b>	7 Amount of contribution (\$) <b>\$100.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/26/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ALTON R. PUGH</b> Contributor address; City; State; Zip Code <b>4535 CROTON CIR. EL PASO, TX 79924</b>	Amount of contribution (\$) <b>\$75.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/26/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JOHN GILL</b> Contributor address; City; State; Zip Code <b>10060 RAILROAD DR. EL PASO, TX 79924</b>	Amount of contribution (\$) <b>\$250.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/27/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MARK DORE</b> Contributor address; City; State; Zip Code <b>5721 N. STANTON EL PASO, TX 79912</b>	Amount of contribution (\$) <b>\$100.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/29/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ROBERT CADY</b> Contributor address; City; State; Zip Code <b>194 CHERRY HILL LN. SANTA TERESA, NM</b>	Amount of contribution (\$) <b>\$200.<sup>00</sup></b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

**SCHEDULE A**

2013 MAY -2 PM 5:51

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4/25/2013</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>SCOTT BAIN</b> 6 Contributor address; City; State; Zip Code <b>14160 BLAIR COURT HORIZON CITY, TX 79928</b>	7 Amount of contribution (\$) <b>\$250.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>4/17/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ANNE-SERE HERNANDEZ &amp; ANDREA SPIER DR. HERNANDEZ &amp; DR. M. ASSI</b> Contributor address; City; State; Zip Code <b>1025 QUINTA ANTIGUA LN. EL PASO, TX 79912</b>	Amount of contribution (\$) <b>\$1,998.85</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable) <b>IN-KIND (FOOD FOR FUNDRAISER)</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>4/3/2013</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>OSCAR LEESER</b> Contributor address; City; State; Zip Code <b>1017 QUINTA ANTIGUA EL PASO, TX 79912</b>	Amount of contribution (\$) <b>\$800.00</b> <small>(If travel outside of Texas, complete Schedule T)</small>	In-kind contribution description (if applicable) <b>IN-KIND (RENT)</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:  Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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**LOANS**

CITY CLERK DEPT.

2013 MAY -2 PM 5:51

**SCHEDULE E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

OSCAR LEESER

3 ACCOUNT # (Ethics Commission Filers)

4

TOTAL OF UNITEMIZED LOANS:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$ 5,120.80

5 Date of loan

4-28-2013

7 Name of lender

OSCAR LEESER

☐ out-of-state PAC (ID# \_\_\_\_\_)

9 Loan Amount (\$)

\$ 5,120.80

6 Is lender  
a financial  
Institution?Y ☒ N

8 Lender address; City; State; Zip Code

7101 N. MESA ST. #374  
EL PASO, TX 79912

10 Interest rate

—

11 Maturity date

—

12 Principal occupation / Job title (See Instructions)

BUSINESS OWNER

13 Employer (See Instructions)

EL PASO HYUNAI

14 Description of Collateral

☒ none

15 Check if personal funds were deposited into political account

☒16 GUARANTOR  
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

☒ not applicable

18 Guarantor address; City; State; Zip Code

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

☐ out-of-state PAC (ID# \_\_\_\_\_)

Loan Amount (\$)

Is lender  
a financial  
Institution?

Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

Check if personal funds were deposited into political account

☐GUARANTOR  
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

☐ not applicable

Guarantor address; City; State; Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

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If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

2013 MAY -2 PM 5:51

**EXPENDITURE CATEGORIES FOR BOX 8(a)**Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
FeesGift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing ExpenseSalaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental ExpenseLoan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>5</b>		2 FILER NAME <b>OSCAR LEESER</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4-11-2013</b>		5 Payee name <b>RESULTS VIDEO, INC.</b>			
6 Amount (\$) <b>\$975.<sup>00</sup></b>		7 Payee address; City; State; Zip Code <b>4585 RIPLEY DR. BLDG. 2 EL PASO, TX 79922</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>TV PRODUCTION</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>4-12-2013</b>		Payee name <b>EL PASO INC.</b>			
Amount (\$) <b>\$707.<sup>00</sup></b>		Payee address; City; State; Zip Code <b>120 PORFIRIO DIAZ EL PASO, TX 79902</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>4-12-2013</b>		Payee name <b>WHAT'S UP</b>			
Amount (\$) <b>\$743.<sup>00</sup></b>		Payee address; City; State; Zip Code <b>120 PORFIRIO DIAZ EL PASO, TX 79902</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>ADVERTISING EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T)	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>4-12-2013</b>		Payee name <b>CENTRAL BUSINESS ASSOCIATION</b>			
Amount (\$) <b>\$200.<sup>00</sup></b>		Payee address; City; State; Zip Code <b>310 N. MESA SUITE 420 EL PASO, TX 79901</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>EVENT EXPENSE</b>		Description (If travel outside of Texas, complete Schedule T) <b>LUNCH / FORUM</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

2013 MAY -2 PM 5:52

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4-19-2013	5 Payee name DIRT CHEAP SIGNS	
6 Amount (\$) \$3,204.57	7 Payee address; City; State; Zip Code 7301 BAR K RANCH Rd. LAGO VISTA, TX 78645	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) PRINTING EXPENSE	(b) Description (If travel outside of Texas, complete Schedule T) YARD SIGNS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-19-2013	Payee name DIANA RAMIREZ	
Amount (\$) \$2,200.00	Payee address; City; State; Zip Code 3032 MONROE AVE. EL PASO, TX 79930	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) POLLING EXPENSE	Description (If travel outside of Texas, complete Schedule T) POLL WORKERS
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-19-2013	Payee name DIANA RAMIREZ	
Amount (\$) \$2,457.49	Payee address; City; State; Zip Code 3032 MONROE AVE. EL PASO, TX 79930	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) POLLING EXPENSE	Description (If travel outside of Texas, complete Schedule T) POLL WORKERS
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-24-2013	Payee name VANTAGE POINT VISUAL STUDIOS	
Amount (\$) \$497.95	Payee address; City; State; Zip Code 1109 ARIZONA AVE. EL PASO, TX 79902	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

2013 MAY -2 PM 5:52

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME OSCAR LEESER	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4-26-2013	5 Payee name KDBC	
6 Amount (\$) \$7,110. <sup>00</sup>	7 Payee address; City; State; Zip Code 801 N. OREGON ST. EL PASO, TX 79902	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	(b) Description (If travel outside of Texas, complete Schedule T) MEDIA BUYS
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-26-2013	Payee name KFOX	
Amount (\$) \$7,900. <sup>00</sup>	Payee address; City; State; Zip Code 6004 N. MESA ST. EL PASO, TX 79912	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (If travel outside of Texas, complete Schedule T) MEDIA BUYS
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-26-2013	Payee name KTSM	
Amount (\$) \$6,250. <sup>00</sup>	Payee address; City; State; Zip Code 801 N. OREGON ST. EL PASO, TX 79902	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (If travel outside of Texas, complete Schedule T) MEDIA BUYS
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4-26-2013	Payee name KVIA	
Amount (\$) \$18,470. <sup>00</sup>	Payee address; City; State; Zip Code 4140 RIO BRAVO ST. EL PASO, TX 79902	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE	Description (If travel outside of Texas, complete Schedule T) MEDIA BUYS
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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**POLITICAL EXPENDITURES**

CITY CLERK DEPT.

**SCHEDULE F**

2013 MAY -2 PM 5:52

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4-24-2013		5 Payee name LEVY AD GROUP			
6 Amount (\$) \$10,674.50		7 Payee address; City; State; Zip Code 5905 S. DECATUR BLVD. #1 LAS VEGAS, NV 89118			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4-29-2013		Payee name NORTH AMERICAN COMMUNICATIONS			
Amount (\$) \$14,421.59		Payee address; City; State; Zip Code 141 NAC DRIVE DUNCANVILLE, PA 16635			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) PRINTING EXPENSE		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4-30-2013		Payee name JUAN STOCKMEYER			
Amount (\$) \$84.79		Payee address; City; State; Zip Code 515 HAGUE EL PASO, TX 79902			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) POLLING EXPENSE		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4-30-2013		Payee name SELECT PRINTING			
Amount (\$) \$2,306.98		Payee address; City; State; Zip Code 6800 GATEWAY EAST, STE. 3-F EL PASO, TX 79915			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) PRINTING EXPENSE		Description (If travel outside of Texas, complete Schedule T) HANDOUTS	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**SCHEDULE F**

2013 MAY -2 PM 5:52

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
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Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:		2 FILER NAME OSCAR LEESER		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 4-30-2013		5 Payee name JAMES HARMON			
6 Amount (\$) \$1,692. <sup>00</sup>		7 Payee address; City; State; Zip Code 19 SAWMILL RD. BRANFORD, CT 06405			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) OTHER		(b) Description (If travel outside of Texas, complete Schedule T) PHONE SURVEY	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4-30-2013		Payee name CHRIS ACOSTA			
Amount (\$) \$720.64		Payee address; City; State; Zip Code 9327 ELGIN EL PASO, TX 79907			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) FOOD/BEVERAGE EXPENSE		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4-30-2013		Payee name SELECT PRINTING			
Amount (\$) \$81.19		Payee address; City; State; Zip Code 6800 GATEWAY EAST, STE. 3-F EL PASO, TX 79915			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) PRINTING EXPENSE		Description (If travel outside of Texas, complete Schedule T) INVITATIONS	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4-30-2013		Payee name SMA COMMUNICATIONS			
Amount (\$) \$3,200. <sup>00</sup>		Payee address; City; State; Zip Code SAN FRANCISCO, CA			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) ADVERTISING EXPENSE		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
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